MAR 0 3 2006

Atty. Docket No. 0212-CIP-9

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. Serial No.: 10/629,649

Confirmation No.: 6846

Inventors:

Nigel R.A. BEELEY, et al

1654

Filed:

30 July 2003

TC/A.U.: Examiner: RUSSEL, Jeffrey

Title: METHODS AND COMPOSITIONS FOR TREATING POLYCYSTIC OVARY SYNDROME

FACSIMILE TRANSMITTAL COVER SHEET

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I hereby certify that the following listed correspondence in the above-referenced application is being transmitted by facsimile to the Commissioner for Patents, Alexandria, VA to telephone number (571) 273-8300 on this 3rd day of March, 2006.

Docu	ıment	No. of Pages
1)	Response to the Office Action dated December 5, 2005 Under 37 C.F.R. §1.111, and	13
2)	Terminal Disclaimer	1
3)	Fee Transmittal (in duplicate)	2
4)	Statement Under 37 CFR 3.73(b)	1
Taka	al number of pages transmitted (including this page):	18
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/63			/629,649				
FEE TRANSMITTAL For FY 2006				Filling Date 30 J			July 2003				
				First Named Inventor Nige		Nigel R.A	igel R.A. BEELEY, et al				
Applicant plains amail	-L	Examiner Name RUS			SSEL, Jeffrey						
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1654			54				
TOTAL AMOUNT OF PAY	MENT (\$)	130.00		Attorney Docket	No.	0212-CIP	-9				
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Application Type	Fee (\$)	Fee (\$) F	ee (\$)	Fee (\$)	Fee			Fees Paid (\$)			
Utility	300	150	500	250	200) 10	0				
Design	200	100 1	100	50	130	6	5				
Plant	200	100 3	300	150	160	8	0				
Reissue	300	150 5	500	250	60	30	0				
Provisional	200	100	0	0	•)	0				
EXCESS CLAIM FEI Fee Description Each claim over 20 (Each independent cla Multiple dependent c	s)			£	50 50 200 360	mall Entity Fee (\$) 25 100 180					
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)											
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